PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying			
			pape	(s) Transmittai. This c ers. Each additional p	ertificate cannot be used i aper, such as an assignme	for any other accompanying ent or formal drawing, must	
78724	7590 12/24	1/2009	паус		_		
1055 Thomas Jef Suite 400	Professional Cor ferson Street, NW	poration	I he Stat addi tran	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
WASHINGTON,	, DC 20007					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.	
09/699,372	10/31/2000		Courtney Hudson		5322-002	7828	
			PATIENTS WITH CLINIC				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI	EE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	03/24/2010	
EXAMI	NER	ART UNIT	CLASS-SUBCLASS				
PORTER, RACHEL L		3626	705-003000				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG EMERGINGM	ss an assignee is identi in 37 CFR 3.11. Comp NEE ED . COM	ified below, no assignee oletion of this form is NO	(B) RESIDENCE: (CITY New York	atent. If an assignee in assignment. and STATE OR COU.	INTRY)	ocument has been filed for our entity Government	
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			 b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-4545 (enclose an extra copy of this form). 				
5. Change in Entity Statu	is (from status indicated SMALL ENTITY) statu		☐ b. Applicant is no long	ger claiming SMALL l	ENTITY status. See 37 CF	FR 1.27(g)(2).	
	Publication Fee (if requ	ired) will not be accepted	d from anyone other than the Office.	ne applicant; a register	ed attorney or agent; or th	e assignee or other party in	
Authorized Signature _ Typed or printed name	Chadwick A.	fackson, #46,45	95	Date 2. Registration No.	17 · 20/0	<u> </u>	
an application. Confidentia submitting the completed this form and/or suggestion Box 1450, Alexandria, Vir Alexandria, Virginia 2231.	ality is governed by 35 application form to the ns for reducing this burginia 22313-1450. DO 3-1450.	U.S.C. 122 and 37 CFRI USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	1 14 This collection is esti	imated to take 12 minidual case. Any comm r, U.S. Patent and Tra THIS ADDRESS. SI	utes to complete, including the ments on the amount of tirdemark Office, U.S. Department To: Commissioner for the complete that the comple	by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.	